



City of Morgan Hill Employment Application

City of Morgan Hill Human Resources Office, 17555 Peak Avenue, Morgan Hill, CA 95037
Office: 408.779.7278 Job Hotline: 408.779.7276 TDD: 408.776.7381 www.morgan-hill.ca.gov

Office Use Only

Date Received: _____

By: _____

Instructions to Applicants:

1. A separate application is required for each position for which you apply.
2. Type or print in ink. Incomplete or illegible applications *will not* be considered
3. Inform the Human Resources Office of any change of address; otherwise you may lose your opportunity for employment.
4. Materials submitted with the application *will not* be returned.
5. The application **MUST** be completed. A resume *will not* be accepted instead of the completed application.
6. Applicants with disabilities: If you need assistance in the application process, please contact the Human Resources Office as soon as possible.

PERSONAL INFORMATION

Position Applying For: _____

Full Name: _____ Social Security Number: _____
Last First Middle

Mailing Address: _____
Street City State Zip Code

Day Phone: () _____ Evening Phone: () _____ E-Mail _____

Are you over 18? _____ Yes _____ No: If No, can you submit a work permit if hired? _____ Yes _____ No
Police Officer applicants only: What is your date of birth? _____

Driver's License Number: _____ State: _____ Expiration Date: _____

Are you a U.S. citizen or do you have the right to work permanently in the U.S.? _____ Yes _____ No
(If hired, you will be required to submit verification of your legal right to work in the U.S.)

Languages you speak *fluently* other than English: _____

Were you referred to this job opening by a current City of Morgan Hill employee? (if yes, state whom): _____

Please answer the following questions. "Yes" answers are not necessarily disqualifying.

	Yes	No	Explain Here
Have you ever been convicted of any offense other than a driving violation or convictions that are over two years old as of the date of this application for violations of H&S Codes 11357, 11360, 11364, 11365, or 11550 as these statutes relate to marijuana? You are not required to make disclosures prohibited by the Labor Code. If yes, list offense and date here.			
Have you ever been convicted of reckless driving or driving under the influence of alcohol/drugs OR has your driver's license ever been suspended or revoked? If yes, list offense and conviction date under "Explain Here".			
Were you ever discharged from employment or forced to resign? If yes, explain.			
Are you now or have you ever been employed by the City of Morgan Hill? Do you have a relative who is an official or employee of the City of Morgan Hill? If yes, explain.			

EDUCATION AND TRAINING

EDUCATION:

Name and Location of High School _____

Circle the highest grade you have completed.

1 2 3 4 5 6 7 8 9 10 11 12

College 1 2 3 4

High School Graduate:

☐ Yes

☐ No

Passed GED High School Tests:

☐ Yes

☐ No

Name of College or University	Location	Course of Study	Degree Received	Sem./Qtr. Units Completed

Business, Trade Or Technical Schools	Course Studied	Duration	Completed?

Licenses or Certificates that relate to this position (attach copies).	Computer Literacy: List software that you are proficient in using.

WORK EXPERIENCE

Do not indicate "SEE RESUME" - this section must be completed. Starting with your **most recent** experience, list all jobs for the last 10 years and explain any time periods in which you were unemployed. If you have relevant experience and it is more than 10 years old, be sure to document it also. List each change in title or promotion separately. List all paid, volunteer, part-time and internship experience: it will be prorated to a full time equivalent. Use additional sheets if necessary.

Dates of Employment From: Mo/Yr _____ To: Mo/Yr _____	Employer	Type of Business	Job Title	# Supervised
Hours Per Week:	Street Address	City	State/Zip	Name, title & phone # of supervisor
Final Salary:	Duties			
Reason for leaving:				

Dates of Employment FR: Mo/Yr _____ TO: Mo/Yr _____	Employer _____	Type of Business _____	Job Title _____	# Supervised _____
Hours Per Week: _____	Street Address _____	City _____	State/Zip _____	Name, title & phone # of supervisor _____
Final Salary: _____	Duties _____			
Reason for leaving: _____	_____			

Dates of Employment FR: Mo/Yr _____ TO: Mo/Yr _____	Employer _____	Type of Business _____	Job Title _____	# Supervised _____
Hours Per Week: _____	Street Address _____	City _____	State/Zip _____	Name, title & phone # of supervisor _____
Final Salary: _____	Duties _____			
Reason for leaving: _____	_____			

Dates of Employment FR: Mo/Yr _____ TO: Mo/Yr _____	Employer _____	Type of Business _____	Job Title _____	# Supervised _____
Hours Per Week: _____	Street Address _____	City _____	State/Zip _____	Name, title & phone # of supervisor _____
Final Salary: _____	Duties _____			
Reason for leaving: _____	_____			

CERTIFICATION OF APPLICANT: I hereby certify that the information contained in this application for employment is true and complete to the best of my knowledge. I understand that any misrepresentation or deliberate omission of a material fact in my application may disqualify me from the application process or terminate my employment. I agree to undergo a job related physical examination by a City physician, including drug testing, fingerprinting and background check, if offered employment. I authorize the employers, schools or persons named in my application documents to give any additional information regarding my qualifications and character, and release them from any liability for any damages whatsoever for issuing this information to the extent permitted by law.

Signature (Required) _____ **Date** _____



CITY OF MORGAN HILL VOLUNTARY SELF-IDENTIFICATION FORM

Section 1233 of the California Government Code gives each applicant the opportunity to **voluntarily** indicate his/her ethnic identification with the submittal of an employment application. This form will be detached from the application prior to application review and kept in a separate file from the employment application.

This information requested is gathered and summarized for nondiscrimination statistical purposes only. It is unlawful to use this information to discriminate against or give preference to a person for hiring or promotion. Please **do not sign** this form.

DATE: _____ POSITION APPLIED FOR: _____

Please check one:

☐ MALE ☐ FEMALE

Please check one:

- | | | | |
|--------------------------|-----|-----------------------------------|--|
| <input type="checkbox"/> | (1) | White | All persons having origins in any of the original peoples of Europe, North Africa or the Middle East (not of Hispanic origin). |
| <input type="checkbox"/> | (2) | African American | All persons having origins in any of the Black racial groups of Africa (not of Hispanic origin). |
| <input type="checkbox"/> | (3) | Hispanic | All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture of origin. |
| <input type="checkbox"/> | (4) | Asian | All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Pacific Islanders, Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa. |
| <input type="checkbox"/> | (5) | Native American or Alaskan Native | All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition. |

I first learned of this job opening through:

- () The City's Human Resources Office
() A friend or relative
() A City employee
() A job posting or announcement
() City website
() City job hotline
() Channel 17
() An ad in a newspaper or publication. Which one? _____
() Other. Please specify. _____